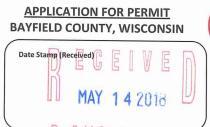
#### SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County**\*

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Owner(s):

Authorized Agent:



NTERE	Permit #:	18-0183
	Date: Amount Paid:	6-13-18 \$75 5-15-18
	Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

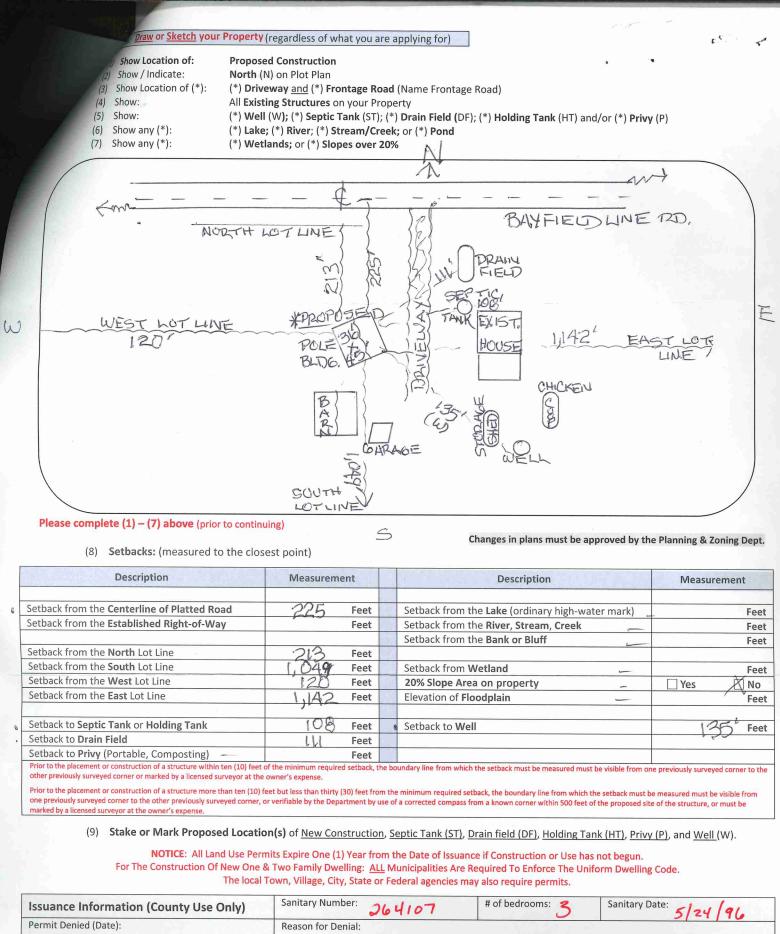
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

TYPE OF PERMIT	REQUES	STED-	LAN	DIICE   CA	NITAR	V D DDIVV	- CON	DITION	01.110						
Owner's Name:	MEQUE	JILD P	Z LAN	D USE   SA		Y PRIVY	CON	DITION			CIAL USE	□ B.		OTHI	ER
111100 0.	- 1		. 12 "		BAY	FIELD LH	) JE 12	D (U)	h ~	Zip: IRC	NY	VER	Teleph	one:	715)
Address of Property	ID L	INNI	DA DA	YL155					, 5	484.7			1016	-80	07.
1.01	200	115 E	BAYF	IELD	City/State/Zip: IRON RIVER, WI 548						847		Cell Ph	one:	715)
Contractor:	MINE AD:						129HI	POF	FO	ULU)			292	-28	37
SFL		actor Phone:	Plumbe	er:						er Phon	e:				
Authorized Agent:		gning Appl	ication on beha	If of Owner(s))	Agent	t Phone: —	Agent I	Mailing Ar	ddrass I	include City/	Stato/7in/		NA		rization
NIIA				y-M			Agenti	vialing At	uuress	include City/	state/Zip):		Attach		rization
2001505	Tax ID# (4-5 digits)  Recorded Deed (i.e. #										☐ Yes				
PROJECT LOCATION	Lega	l Descrip	tion: (Use T	ax Statement)	21	- Q / - C						41516-			ster of Deeds)
			Gov't	Lot Lot(s	) CSI	0 1 08 M Val 8 Pag	.	1 -4/-1 81		1 1/12	Documen	407	-191	R- <u>VOO</u>	-300
NW 1/4,	NE	- 1/4	000	Lotte	,   63	Vol & Pag 274 48		Lot(s) No	о.   в	lock(s) No.	Subdivis	ion:			
			10			367 Town of:	7				1 -1 6'				
Section 2	<u>'</u>	Township	40	N, Range <u>9</u>	_ w	A I I	( )				Lot Size		1.00	eage	
						IOUL	.V						3	<u></u>	
	□ Is	Property	/Land withi	n 300 feet of Riv		am (incl. Intermittent		ance Stru	ucture	is from Sho	reline :	Is Pi	operty in	Δr	e Wetlands
☐ Shoreland —				of Floodplain?		escontinue —	_				feet		olain Zone		Present?
	□ Is	Property	/Land withi	n 1000 feet of La				ance Stru	ucture	is from Sho	reline :		Yes		☐ Yes
1					If ye	escontinue —					feet		□No		□ No
<b>√</b> Non-Shoreland														,	
Value at Time		Letter 1						100							
of Completion		D.		# -4 54			45	#			What T	pe of			
* include		Proje	ct	# of Storie and/or baser		Use		of		Sew	er/Sanit		em		Water
donated time & material				and/or baser	Hein	leit		rooms	Is on the prop					Tilly	
Material	Ne	w Consi	ruction	☐ 1-Story		☐ Seasonal				Auniainal/	Cia			11-13	
~			Alteration	☐ 1-Story +	Loft	✓ Year Round				/unicipal/					
\$ 200000		nversion		□ 2-Story	LOIL				-				-	AL.	Well
_0,000			xisting bldg)	☐ Basement	t	g dantally (Exis									7 🗆
		n a Busi		☐ No Basem	ent		121	Vone			(w/service contract)				
		perty		☐ Foundation				☐ Compost Toilet							
	N PC	LE E	3LD6.	P0575/1	<b>NON</b>					lone					
Existing Structure	· (if ne	rmit heir	a annlied fo	r is relevant to it	1	Longth			100-4	1					
Proposed Constru		rine sen	ів арріїса іо	r is relevant to it		Length:			Widt			F-12	leight:		
						zongen.			vviu			ı	leight:		
Proposed Us	e	1				Proposed Struct	ure				19 19	Dimensi		S	quare
	-1		D : 1 1									Difficits	ons	Fo	otage
						ure on property	)				(	Х	)		
			Residence	e (i.e. cabin, hu with Loft	nting s	nack, etc.)					(	Х	)		
✓ Residential I	Use			with a Porch		Later				· ·	- (	X	)		
4				with (2 <sup>nd</sup> ) Po							(	X			
				with a Deck							1	X	)	· · ·	
				with (2 <sup>nd</sup> ) De							1	X	- /		
Commercial	Use			with Attache	ed Gara	age					1	X	,		
			Bunkhous			sleeping quarters	s or $\Box$ c	ooking &	food r	ren facilitio	1 (	Х	7.7		
				ome (manufactu			<u>, oi</u> – c	OOKING &	k 1000 p	rep racilitie	5) (	X	,		
	ľ			Alteration (sp							1	X	- ,		
☐ Municipal U	se					POLE BLDG	b-in	01/6-1	IN EXTA	1-1110	1 10	10.00	1	1 /	200
			Accessory	Building Addit	tion/Al	Iteration (specify	v)	SEIVE /	TAUN	HADI	10 13	6 X Z	57	110	20
			, ,			(specif					- '	٨	,		
			Special He	e: (eynlain)							1		· ·		
			Condition	al Use: (evaluin)							- (	X	)		
			Other: (ex								- (	X	)		
			Julier. (ex	Piaiii)							(	Х	)		
			EAU.												
I (we) declare that this am (are) responsible for may be a result of Ray	application	n (including	any accompanyi	ng information) has be	en eyamir	TING CONSTRUCTION	o hort of m	welough know	بمالحانية	all balls for to a	a contraction of the	d complete	I (wa)!		416

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) 54847 Address to send permit 3615 BAYFIELD LINE PD. **Attach** Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Date

e Deed <u>All</u> Owners must sign <u>or</u> letter(s) of authorization must accompany this application)



Issuance Information (County Use Only)	Sanitary Number:	64107	# of bedrooms: 3	Sanitary Date: 5/24/96				
Permit Denied (Date):	Reason for Denial:				.,,,,			
Permit #: 18-0183	Permit Date: 6-13-	-18						
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes (Deed of Record □ Yes)    Yes (Deed of Record □ Yes) □ Yes   Contiguent	ous Lot(s))	Mitigation Required Mitigation Attached			□ Yes No □ Yes No			
Granted by Variance (B.O.A.)  ☐ Yes No Case #:		Previously Granted by Variance (B.O.A.)  ☐ Yes   # No  Case #:						
Was Proposed Building Site Delineated Yes \( \) No	Stakes		es Represented by Owner Was Property Surveyed					
Inspection Record: Thrustere Set-backs appear Code complian Pending Condition	conditions a t. Land use pu	s represented may be	by applicant issued	Zoning District Lakes Classification				
Date of Inspection: 66 18	Inspected by:	Norwood	Service of	Date of Re-Inspection	on:			
Condition(s): Town, Committee or Board Conditions Atta	ched?  Yes  No – (If	No they need to be atta	ached.)	- M of A	ecsary			
county and UDC permits, N	Jo pressurized	Water Shall	enter who built	disauntes	5-03a-			
Structure shall not be used county and use permits. A approved connection to Pow	TS. Must me	cet and main	tail set lacks	5				
Signature of Inspector: (Edd Notwood			TALL TO	Date of Approva	1.17 18			
Hold For Sanitary: 🗆 Hold For TBA: 🗆 _	Hold For Affic	davit: 🗆	Hold For Fees:					

City, Village, State or Federal May Also Be Required

SANITARY SIGN SPECIAL CONDITIONAL BOA -

## BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	18-0	183		Į:	ssued	То: Ма	Marc & Linda Bayliss								
Location:	NW	1/4	of	NE	1/4	Section	21	Township	48	N.	Range	9	W.	Town of	Oulu
Gov't Lot			L	.ot		Blo	ock	Sul	odivisio	n	,			CSM#	

For: Residential Accessory Structure: [ 1- Story; Pole Building (36' x 45') = 1,620 sq. ft. ]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Structure shall not be used for human habitation / sleeping purposes without necessary County and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

**Todd Norwood** 

Authorized Issuing Official

June 13, 2018

Date

SUBMIT: OMPLETED APPLICATION, TAX STATEME: AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

### APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Permit #:	18-0185
Date:	6-13-18
Amount Paid:	\$185 6-4-18
Refund:	

DO NOT START CONST		2	ounty Zoning D			Bayfield Co. Zo LICANT.	ning D	)ept/	FILL	OUT IN	INK (NO PE	NCIL)			
TYPE OF PERMIT R	EQUEST	ED-	LAND	USE SAN	VITARY	Y D PRIVY	□ cor	NDITIONAL	USE SPEC	IAL US	E □ B.O.	Α. 🗆	OTHE	R	
Owner's Name: Ethan		$\overline{}$			Mailir	ng Address: 155 Range L		City/S	tate/7in·			Telepho	ne:		
Address of Property:				urport Rd		State/Zip: Ron River						Cell Pho フ/5 - 2		5517	
Contractor: Solf Contractor Phone: Plumber: Plumber Phone:															
Authorized Agent: (Person Signing Application on behalf of Owner(s))  Agent Phone:  Agent Mailing Address (include City/State/Zip):  Written Authorization  Attached  Yes □ No															
PROJECT LOCATION	Legal [	Descript	t <mark>ion</mark> : (Use Ta	ax Statement)	Tax II	2670	13				led Document	: (i.e. Pro		wnership)	
NE 1/4,	SE	1/4	Gov't	Lot Lot(s)	CS	M Vol & Pag	ge	Lot(s) No.	Block(s) No.	Subdiv	ision:		,,,		
Section 14	, то	ownship	48	I, Range O	_ w	Town of:	201	0		Lot Siz	е	Acrea	9.0	0	
	1			n 300 feet of River	100	eam (incl. Intermitten	2	stance Struc	ture is from Shor	eline :		erty in	0.000	Wetlands	
☐ Shoreland →		10000000		1000 feet of La	ke, Por		Dis	stance Struc	ture is from Sho			Xes No		☐ Yes >> No	
Non-Shoreland								8							
Value at Time of Completion * include donated time &	of Completion * include Project # of Stories					Foundation		# of edrooms	What Type of Sewer/Sanitary Sy Is on the proper			n	Type of Water		
material			1.0		TIME S			tructure	9-13 NW					property	
			ruction	1-Story		Basement		1	☐ Municipal/					☐ City	
\$25,000,00	☐ Add		Alteration	☐ 1-Story +	Loft	Foundatio	-	2	□ (New) Sanitary Specify Type: □     □ Sanitary (Exists) Specify Type: □						
2,000			n xisting bldg)	☐ 2-Story				3		or Vaulted (min 200 gallon)				Done	
		7.0	ness on		Use X None  Portable (w/se										
	_	erty													
									None						
			14.16		Q - 1				Width:			t-ba			
Proposed Constru		mit beir	ng applied fo	r is relevant to it	[)	Length:	>++		Width: リC	) f 7		eight: eight:	12 f	7	
Proposed Us					ei pi	Proposed Struc								quare ootage	
		1						1000	Carallan File		Dimensio	No. 1		1.4 LI 5	
		X	· ·	-	t struc	cture on propert				(	40 fx 6	No. 1	2,4	W FF	
/	-		· ·	e (i.e. cabin, hu	t struc	cture on propert				(	40 fx 6	No. 1		W FF	
Residential		X	· ·	e (i.e. cabin, hu with Loft	st struc	cture on propert				(	40 ftx 60 x	No. 1		WFF	
Residential		X	· ·	e (i.e. cabin, hu with Loft with a Porc	et struc unting h	cture on propert				(	40 fx 6	No. 1			
Residential		X	· ·	e (i.e. cabin, hu with Loft	t structuring  h  orch	cture on propert				(	x x x x	No. 1			
Residential		X	· ·	with Loft with a Porc with (2 <sup>nd</sup> ) P	t structuring  h  orch	cture on propert shack, etc.)	y)				x x x x x	No. 1			
Residential	Use	X	· ·	e (i.e. cabin, hu with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck	h orch	cture on propert shack, etc.)	y)	**			x x x x x x	No. 1		W FF -	
	Use	X	Residence	e (i.e. cabin, hu with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck with (2 <sup>nd</sup> ) D with Attach	h orch ceck	cture on propert shack, etc.)	(v)			(	x x x x x x x	No. 1		ω <del>γ</del> γ	
	Use		Residence	with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck with (2 <sup>nd</sup> ) D with Attach se w/ ( sanita	h orch c eck ned Ga	shack, etc.)	ers, <u>or</u>	cooking &	food prep facilitie	( ( ( ( ( ( ( ess) (	x x x x x x x x x	No. 1		W F)	
☐ Commercial	Use		Residence Bunkhou Mobile H	with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck with (2 <sup>nd</sup> ) D with Attack se w/ (□ sanita lome (manufact	h orch c eck ned Ga ry, or	cture on propert shack, etc.)	ers, <u>or</u>	cooking &	food prep facilitie	( ( ( ( ( ess) (	x x x x x x x x x x	No. 1		W F)	
	Use		Residence  Bunkhou  Mobile H	with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck with (2 <sup>nd</sup> ) D with Attack se w/ (□ sanita lome (manufact	h orch ceck ned Ga ry, or cured da pecify)	shack, etc.)  arage    sleeping quarter   ate)	ers, <u>or</u>	cooking &	food prep facilitie	( ( ( ( ( ess) (	x x x x x x x x x x x	No. 1		W F)	
☐ Commercial	Use		Bunkhou Mobile H Addition	e (i.e. cabin, he with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck with (2 <sup>nd</sup> ) D with Attach se w/ (□ sanita Iome (manufact /Alteration (sy Building (s	h orch c eck ned Ga ry, or cured da pecify)	shack, etc.)  arage    sleeping quarter   ate)	ers, <u>or</u>	cooking &	food prep facilitie	( ( ( ( ( ess) (	X X X X X X X X X X X	No. 1		W FT	
☐ Commercial	Use		Bunkhou Mobile H Addition Accessor	e (i.e. cabin, he with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck with (2 <sup>nd</sup> ) D with Attach se w/ (□ sanitalome (manufact /Alteration (sy Building Add	h orch ceck ned Ga ry, or cured da pecify) pecify)	arage    sleeping quarter   steeping quarter   steeping quarter   Alteration (spec	ers, <u>or</u>	cooking &	food prep facilition	( ( ( ( ( ess) (	x x x x x x x x x x x x x x x x x	No. 1			
☐ Commercial	Use		Bunkhou Mobile H Addition Accessor Accessor	e (i.e. cabin, he with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck with (2 <sup>nd</sup> ) D with Attach se w/ ( sanita Iome (manufact / Alteration (sy Building Add se: (explain)	h orch c eck ned Ga ry, or cured da pecify) pecify)	shack, etc.)  arage  sleeping quarterate)  Alteration (specification)	ers, <u>or</u>	cooking &	food prep facilitie	( ( ( ( ( ess) (	X X X X X X X X X X X X X	No. 1			
☐ Commercial	Use		Bunkhou Mobile H Addition Accessor Accessor Special U	with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck with (2 <sup>nd</sup> ) D with Attach se w/ ( sanita lome (manufact /Alteration (s y Building (s y Building Add se: (explain)	h orch c eck ned Ga ry, or ured di pecify) pecify) ition/	arage    sleeping quarter   steeping quarter   steeping quarter   Alteration (spec	ers, <u>or</u>	cooking &	food prep facilitie	( ( ( ( ( ess) (	X X X X X X X X X X X X X	No. 1			
I (we) declare that this a (are) responsible for the result of Bayfield Count property at any reasona Owner(s):	Use	including accuracy of this information the purposers listed	Bunkhou Mobile H Addition, Accessor  Special U Condition Other: (e FAILURE TC any accompanying fall information I (we) and be of inspection dien the Deed	e (i.e. cabin, he with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck with (2 <sup>nd</sup> ) D with Attach se w/ (□ sanita Iome (manufact /Alteration (sy Building Add se: (explain)	h orch c eck ned Ga ry, or cured da pecify) pecify) lition/s  for STAF en examining and til with this	Alteration (specified by me (us) and tot that it will be relied upor application. I (we) cons	ers, or Constitution of the best of the be	OUT A PERMIT my (our) knowle leld County in det inty officials char	food prep facilities  TWILL RESULT IN PE dge and belief it is true ermining whether to is rged with administering	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	X X X X X X X X X X X X X X X X X X X	(+) ) ) ) ) ) ) ) ) ) ) (e) acknowle accept liabil access to the	adge that	: I (we) am may be a	
I (we) declare that this a (are) responsible for the result of Bayfield Count property at any reasona Owner(s):	Use	including accuracy of this information the purposers listed	Bunkhou Mobile H Addition, Accessor  Special U Condition Other: (e FAILURE TC any accompanying fall information I (we) and be of inspection dien the Deed	e (i.e. cabin, he with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck with (2 <sup>nd</sup> ) D with Attach se w/ (□ sanita Iome (manufact /Alteration (sy Building Add se: (explain)	h orch c eck ned Ga ry, or cured da pecify) pecify) lition/s  for STAF en examining and til with this	Alteration (specified by me (us) and tot that it will be relied upor application. I (we) cons	ers, or Constitution of the best of the be	OUT A PERMIT my (our) knowle leld County in det inty officials char	food prep facilities  TWILL RESULT IN PE dge and belief it is true ermining whether to is rged with administering	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	X X X X X X X X X X X X X X X X X X X	) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) /e) acknowled accept liabil access to the care of the care	adge that lity which he above	: I (we) am may be a described	
☐ Commercial ☐ Municipal U  I (we) declare that this a (are) responsible for the result of Bayfield Count property at any reasona Owner(s):	Use	including accuracy of this information the purposers listed	Bunkhou Mobile H Addition, Accessor  Special U Condition Other: (e FAILURE TC any accompanyir of all information 1 (we) an base of inspection d on the Deed	with Loft with a Porc with (2 <sup>nd</sup> ) P with a Deck with (2 <sup>nd</sup> ) D with Attach se w/ ( sanita lome (manufact /Alteration (s y Building (s y Building Add se: (explain) nal Use: (explain) postain A PERMIT ig information) has be I (we) am (are) providing in or All Owners must all of the owner(s	h orch c eck ned Ga ry, or cured da pecify) pecify) ition/	Alteration (specified by me (us) and to that it will be relied upon application. I (we) consultation of authorization of auth	ers, or Control of the second	OUT A PERMIT my (our) knowle leld County in det inty officials char	food prep facilities  TWILL RESULT IN PE dge and belief it is true ermining whether to is rged with administering	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	X X X X X X X X X X X X X X X Date	) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) /e) acknowled accept liabil access to the care of the care	adge that lity which he above	I (we) am I may be a described	

#### w or <u>Sketch</u> your Property (regardless of what you are applying for)

Fill Out in Ink – NO PEN

Show Location of:

Show / Indicate:

**Proposed Construction** 

Show Location of (\*):

North (N) on Plot Plan

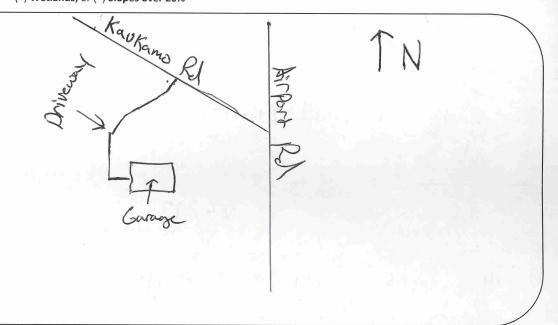
(4) Show: (\*) Driveway and (\*) Frontage Road (Name Frontage Road) All Existing Structures on your Property

(5) Show: (6)Show any (\*): (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

Show any (\*):

(\*) Wetlands; or (\*) Slopes over 20%



#### Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurem	ent	Description	Measur	ement
Setback from the <b>Centerline of Platted Road</b>	370	Feet	Setback from the <b>Lake</b> (ordinary high-water mark)		- Feet
Setback from the Established Right-of-Way	360	Feet	Setback from the River, Stream, Creek		Feet
			Setback from the Bank or Bluff	_	Feet
Setback from the <b>North</b> Lot Line	400	Feet			
Setback from the <b>South</b> Lot Line	860	Feet	Setback from <b>Wetland</b>	-	Feet
Setback from the <b>West</b> Lot Line	680	Feet	20% Slope Area on the property	☐ Yes	No
Setback from the <b>East</b> Lot Line	600	Feet	Elevation of Floodplain	pr.	Feet
Setback to Septic Tank or Holding Tank	Λ.	Feet	Setback to Well		- Feet
Setback to <b>Drain Field</b>	1/1)	Feet			
Setback to <b>Privy</b> (Portable, Composting)	10000	Feet			

other previously surveyed corner or marked by a licensed surveyor at the owner's expense

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be one previously surveyed corner to the other previously marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:		A HATE OF	
Permit #: 18-0185	Permit Date: 6-13	-18		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes (Deed of Recor	d) No lous Lot(s)) No	Mitigation Required Mitigation Attached	☐ Yes	Affidavit Required Affidavit Attached Yes No
Granted by Variance (B.O.A.)  ☐ Yes No Case #:		Previously Granted by  Yes No		se#: NA
Was Parcel Legally Created Was Proposed Building Site Delineated Yes No		Were Property Line	es Represented by Owne Was Property Surveyed	
Inspection Record: Project location a Coda Compliant. OF to		le fern. t.	mor appears	Zoning District (A21) Lakes Classification (2)
Date of Inspection: 6/7/2018	Inspected by:	et Schi	erm An	Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Atta	ched? 🗆 Yes 🗆 No – (If No	No they need to be atta	ched.)	0. 1.
Not to be used	AND ADDRESS OF THE RESIDENCE OF THE RESI	new hab		100 HzO under
Pressure or Plumbina	, fixtures	Low be !	nstalled i	~ Structure
UNIESS Structure is Servi	ed by a too	ke Omylic		2
Signature of Inspector:	14/1	. /		Date of Approval: 7/18
Hold For Sanitary: 🗆 Hold For TBA:	Hold For Affid	avit: 🗆	Hold For Fees: 🗌 🔻	□

City, Village, State or Federal May Also Be Required

LAND USE - X
SANITARY - None
SIGN SPECIAL CONDITIONAL BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

**Ethan Rautio** 18-0185 Issued To: No. Town of Oulu Range 9 W. 48 N. **Township** 1/4 of **SE** 1/4 Section 14 NE I ocation: CSM# Subdivision Block Lot Gov't Lot

For: Residential Principal Structure: [1- Story; Garage (40' x 60') = 2,400 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not to be used for human habitation. No water under pressure or plumbing fixtures in structure unless structure is served by a code compliant POWTS

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

**Rob Schierman** 

Authorized Issuing Official

June 13, 2018

Date